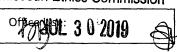


Missouri Ethics Commission (MEC)
PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov



## **Statement of Committee Organization**

1.	Statement Information  Date: JULY 25, 2019		The Belleville State and Commission
	Type: $\blacksquare$ New $\square$ Amended (if amending, enter MEC ID $\underline{C190921}$ & section changed)		
2.	Committee Information		
	MADAM FOR AMERICA		
	Name of Committee		
	TWO PERSHING SQUARE 2300 MAIN STREET, SUITE 900 KAI	NSAS CITY, MISSOURI 64108	816 2 <b>37-8574</b>
	Committee Mailing Address, City, State, & Zip	IOED	Telephone Number
	·	JCEB	
		County Clerk or Board of Election Commission	
	Committee Type:   Campaign   Candidate   Continuing (	PAC) Li Debt Service Li Expl	oratory
3.	Treasurer/Deputy Treasurer Information	CAST STATE OF AN OWNER.	on the same of
	DOROTHY L. MCCLENDON	· .	
	Treasurer's Name (First & Last)	Treasurer's Email Address (optional)	010 050 1000
	P.O. BOX 9426 RAYTOWN, MISSOURI 64133	()	(816) 353-4268
	Treasurer's Mailing Address, City, State, & Zip CEE CEE COLE	Treasurer's Home Telephone Number	Treasurer's Work Telephone Number
	Deputy Treasurer's Name (if one appointed)	Deputy Treasurer's Email Address (optional)	
	P.O. BOX 9426 RAYTOWN, MISSOURI 64133  Deputy Treasurer's Mailing Address, City, State, & Zip	Dep. Treasurer's Home Telephone Number	(816) 353-4268  Dep. Treasurer's Work Telephone Number
	Additional Committee Information	etalicykologia flipiałaty oroczna o satucka.	2. (1996年中,1967年中,1967年1967年)。 1967年
	Additional Committee Officer's Name & Title (if any)	Additional Committee Officer's Mailing Add	ress, City, State, & Zip
	Connected Organization's Name (if any)	Connected Organization's Mailing Address,	City, State, & Zip
	CANDIDATES: Do you have more than one candidate committee	?   Yes (refer to instructions on	back) No
5.	Official Bank Account Information (required by all committees)		
	U.S. BANK 9063 E, GREGORY BOULEVARD RAYTOWN, MISSOURI 64133	MADAM FOR AMERICA	145574526672
	Name & Mailing Address, City, State, & Zip of Financial Institution	Account Name	Account Number
6	Candidate Supported or Opposed (candidate committees must		arriver to get on given the said by the first the wealth
Ο.	-candidate supported or Opposed (candidate committees must	Include Sen, ir candidate)	
	Name & Mailing Address, City, State & Zip of Candidate	() Telephone Number (Candidate Committees	()
	Election Date Office Sought & Political Subdivision	Political Party	Support or Oppose
7	Ballot Measure Supported or Opposed (campaign committees i	must complete this section)	Colored and a second second second
		must complete this section,	ing daga panggang nanggang panggang panggang da panggang ba
	Name of Ballot Measure	Election Date & Political Subdivision	Support or Oppose
0	Signature(s) Check certification(s) & sign (required by all com	mittooc)	The late of the action of the second of the
8.			
	I affirm and attest under penalty of perjury that information and facts in this report are complete, true, and accurate. I further acknowledge that I am aware that any false statement or declaration made herein is punishable under Ch. 575 RSMo.		
	Committed Treasured	Candidate (Candidate Committees Only)	

MO 300-1308 Packet (Rev. 12/2016) Forth must be completed in full & contain original signature(s), fax filings are not accepted.